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BOOKS RECEIVED

Books received by THE WESTERN JOURNAL OF MEDICINE are acknowledged in this column. Selections will be made for more extensive review in the interest of readers as space permits.

AID™—The Antibiotics Indications Device—Developed by Excerpta Medica Services, Inc., Editorial Consultant Committee (Chairman: Maxwell Finland, MD, Professor of Medicine, Harvard University). Excerpta Medica Services, Inc., P.O. Box 3085, Princeton, NJ (08540), 1978. 32-page booklet, plus device in back-cover pocket; 3 or less, \$11.95 each; 4 to 10, \$10.75 each; 11 to 25, \$10.25 each; quantity discount prices upon request.

BASIC & CLINICAL IMMUNOLOGY—Second Edition—Edited by H. Hugh Fudenberg, MD, Professor and Chairman, Department of Basic and Clinical Immunology and Microbiology, Medical University of South Carolina, Charleston; Daniel P. Stites, MD, Associate Professor of Laboratory Medicine and Medicine, Director, Immunology Laboratory, University of California, San Francisco; Joseph L. Caldwell, MD, Assistant Professor of Medicine, University of California, San Francisco, and Veterans Administration Hospital, San Francisco; and J. Vivian Wells, MD, FRACP, FRCPA, Senior Staff Specialist in Clinical Immunology, Kolling Institute of Medical Research, Royal North Shore Hospital, Sydney. Lange Medical Publications, Drawer L, Los Altos, CA (94022), 1978. 758 pages, \$14.50.

BETTER HEALTH THROUGH NUTRITION—A Guide for Cancer Patients—Harry Drasin, MD, Oncology Fellow, Claire Zellerbach Saroni Tumor Institute, Mt. Zion Hospital and Medical Center, San Francisco, American Cancer Society Clinical Fellow; Ernest Rosenbaum, MD, Associate Chief of Medicine, Mt. Zion Hospital and Medical Center; Medical Director, San Francisco Regional Cancer Foundation; Carol A. Stitt, RD, Therapeutic Dietician, Mt. Zion Hospital and Medical Center; and Isadora R. Rosenbaum, Medical Assistant, San Francisco. Copies are available from The Gift Shop, Mt. Zion Hospital and Medical Center, P.O. Box 7821, San Francisco, CA (94120), 1978. 58 pages, \$2.00.

CARDIAC CATHETERIZATION AND ANGIOCARDIOGRAPHY—Third Edition—David Vere, MA, MD, FRCP, Consultant Cardiologist to Sheffield Area Health Authority (Teaching); Lecturer in Cardiology in the University of Sheffield; Ronald G. Grainger, MD, FRCP, DMRD, FRCP, FACP(Hon), Northern General Hospital, Sheffield, Consultant Radiologist to Sheffield Area Health Authority (Teaching), Clinical Teacher in Radiodiagnosis in the University of Sheffield, Visiting Professor, Radiology Dept., Stanford University, Palo Alto, CA; With a chapter on echocardiography by D. R. Naik, MB, ChB, DMRD, FRCP, Consultant Radiologist to Sheffield Area Health Authority (Teaching), Clinical Teacher in Radiodiagnosis in the University of Sheffield; Foreword by Sir John McMichael, MD, FRCP, FRS, Sometime Director, Postgraduate Medical Federation, London, Sometime Professor of Medicine, Royal Postgraduate Medical School, London. Churchill Livingstone—Medical Division, Longman Inc., 19 West 44th St., New York City (10036), 1978. 239 pages, \$29.50.

DAVIDSON'S PRINCIPLES AND PRACTICE OF MEDICINE—A Textbook for Students and Doctors—Twelfth Edition—Edited by John Macleod, MB, ChB, FRCP(Ed), Head of University Department of Medicine, Western General Hospital; Consultant Physician, Western General Hospital, Royal Edinburgh Hospital and Clinic for Rheumatic Diseases, Royal Infirmary, Edinburgh. Churchill Livingstone—Medical Division, Longman Inc., 19 West 44th St., New York City (10036), 1977. 978 pages, \$16.00 (softbound).

ENERGETICS—Clarence M. Agress, MD. Grosset & Dunlap, Publishers, 61 Madison Ave., New York, NY (10010), 1978. 186 pages, \$10.00, \$11.50 in Canada.

EYANS' HISTOLOGICAL APPEARANCES OF TUMORS—Third Edition: Volumes I and II—David J. B. Ashley, TD, MD, FRCP(Ed), Consultant Pathologist, Morriston Hospital, Swansea; Visiting Professor of Pathology, University of Chicago; Visiting Scholar, State University of New York, Downstate Medical Center; Formerly Research Fellow, Armed Forces Institute of Pathology, Washington, DC; Senior Registrar in Pathology, David Lewis Northern Hospital, Liverpool. Churchill Livingstone—Medical Division, Longman Inc., 19 West 44th St., New York City (10036), 1978. 858 pages, in 2 volumes, \$85.00.

HEALTH CARE CAPITAL: COMPETITION AND CONTROL—Proceedings of Capital Investment Conference Sponsored by the University of Pittsburgh Graduate School of Public Health and Supported under Federal Contract No. HRA 230-75-0208. Editors: Gordon K. MacLeod, Professor and Chairman, Dept. of Health Services Administration, Graduate School of Public Health, University of Pittsburgh; and Mark Perlman, The University Professor of Economics, University of Pittsburgh. Ballinger Publishing Company, 17 Dunster Street, Cambridge, MA (02138), 1978. 411 pages, \$22.50.

THE HOSPICE MOVEMENT—A Better Way of Caring for the Dying—Sandor Stoddard. Stein and Day Publishers, Scarborough House, Briarcliff Manor, NY (10510), 1978. 266 pages, \$8.95.

THE MALPRACTITIONERS—John Guinther. Anchor Press/Doubleday & Company, Inc., 245 Park Avenue, New York City (10017), 1978. 347 pages, \$10.00.

POVERTY AND HEALTH—Economic Causes and Consequences of Health Problems—Harold S. Luft, PhD, Assistant Professor of Health Economics in the Health Services Research Program, Stanford University School of Medicine, Stanford, California. Ballinger Publishing Company, 17 Dunster Street, Harvard Square, Cambridge, MA (02138), 1978. 263 pages, \$16.50.

Brief Summary of Prescribing Information Combined TEGOPEN® (cloxacillin sodium) Capsules and Oral Solution

For complete information, consult Official Package Circular. (12) TEGOPEN 9/11/75

Indications: Although the principal indication for cloxacillin sodium is in the treatment of infections due to penicillinase-producing staphylococci, it may be used to initiate therapy in such patients in whom a staphylococcal infection is suspected. (See Important Note below.)

Bacteriologic studies to determine the causative organisms and their sensitivity to cloxacillin sodium should be performed.

Important Note: When it is judged necessary that treatment be initiated before definitive culture and sensitivity results are known, the choice of cloxacillin sodium should take into consideration the fact that it has been shown to be effective only in the treatment of infections caused by pneumococci, Group A beta-hemolytic streptococci, and penicillin G-resistant and penicillin G-sensitive staphylococci. If the bacteriology report later indicates the infection is due to an organism other than a penicillin G-resistant staphylococcus sensitive to cloxacillin sodium, the physician is advised to continue therapy with a drug other than cloxacillin sodium or any other penicillinase-resistant semi-synthetic penicillin.

Recent studies have reported that the percentage of staphylococcal isolates resistant to penicillin G outside the hospital is increasing, approximating the high percentage of resistant staphylococcal isolates found in the hospital. For this reason, it is recommended that a penicillinase-resistant penicillin be used as initial therapy for any suspected staphylococcal infection until culture and sensitivity results are known.

Cloxacillin sodium is a compound that acts through a mechanism similar to that of methicillin against penicillin G-resistant staphylococci. Strains of staphylococci resistant to methicillin have existed in nature and it is known that the number of these strains reported has been increasing. Such strains of staphylococci have been capable of producing serious disease, in some instances resulting in fatality. Because of this, there is concern that widespread use of the penicillinase-resistant penicillins may result in the appearance of an increasing number of staphylococcal strains which are resistant to these penicillins.

Methicillin-resistant strains are almost always resistant to all other penicillinase-resistant penicillins (cross-resistance with cephalosporin derivatives also occurs frequently). Resistance to any penicillinase-resistant penicillin should be interpreted as evidence of clinical resistance to all, in spite of the fact that minor variations in *in vitro* sensitivity may be encountered when more than one penicillinase-resistant penicillin is tested against the same strain of staphylococcus.

Contraindications: A history of a previous hypersensitivity reaction to any of the penicillins is a contraindication. **Warnings:** Serious and occasionally fatal hypersensitivity (anaphylactoid) reactions have been reported in patients on penicillin therapy. Although anaphylaxis is more frequent following parenteral therapy it has occurred in patients on oral penicillins. These reactions are more apt to occur in individuals with a history of sensitivity to multiple allergens.

There have been well documented reports of individuals with a history of penicillin hypersensitivity reactions who have experienced severe hypersensitivity reactions when treated with a cephalosporin. Before therapy with a penicillin, careful inquiry should be made concerning previous hypersensitivity reactions to penicillins, cephalosporins, and other allergens. If an allergic reaction occurs, the drug should be discontinued and the patient treated with the usual agents, e.g., pressor amines, antihistamines, and corticosteroids.

Safety for use in pregnancy has not been established. **Precautions:** The possibility of the occurrence of superinfections with mycotic organisms or other pathogens should be kept in mind when using this compound, as with other antibiotics. If superinfection occurs during therapy, appropriate measures should be taken.

As with any potent drug, periodic assessment of organ system function, including renal, hepatic, and hematopoietic, should be made during long-term therapy.

Adverse Reactions: Gastrointestinal disturbances, such as nausea, epigastric discomfort, flatulence, and loose stools, have been noted by some patients. Mildly elevated SGOT levels (less than 100 units) have been reported in a few patients for whom pretherapeutic determinations were not made. Skin rashes and allergic symptoms, including wheezing and sneezing, have occasionally been encountered. Eosinophilia, with or without overt allergic manifestations, has been noted in some patients during therapy. **Usual Dosage: Adults:** 250 mg. q. 6h.

Children: 50 mg./Kg./day in equally divided doses q. 6h. Children weighing more than 20 Kg. should be given the adult dose. Administer on empty stomach for maximum absorption.

N.B.: INFECTIONS CAUSED BY GROUP A BETA-HEMOLYTIC STREPTOCOCCI SHOULD BE TREATED FOR AT LEAST 10 DAYS TO HELP PREVENT THE OCCURRENCE OF ACUTE RHEUMATIC FEVER OR ACUTE GLOMERULONEPHRITIS.

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THIS LISTING of continuing education programs in California and Hawaii is supplied by the Committee on Continuing Medical Education of the California Medical Association. All courses and meetings listed have been approved for Category I credit toward the CMA Certificate in Continuing Medical Education. To have accredited courses listed here, please send information at least two months in advance to Committee on Continuing Medical Education, California Medical Association, 731 Market Street, San Francisco 94103; or phone (415) 777-2000, ext. 146. For a list of organizations approved for Category I credit toward the CMA Certificate in Continuing Medical Education or for more information on accreditation or certification, please write to the above address.

ANESTHESIOLOGY

September 8-9—Update of Anesthetic Drugs and Monitoring. STAN. Friday-Saturday.

September 9-16—Practical Management of Anesthetic Problems. USC at Mauna Kea Beach Hotel, Kamuela, Hawaii. One week. 31¼ hrs. \$325.

October 7-8—Practical Closed Circuit Anesthesia. PMC. Saturday-Sunday. 12 hrs. \$150.

CANCER

October 7—Leukemia. UCSF. Saturday.

October 25-27—Cancer Symposium—Second Annual. Scripps Memorial Hospital at Islandia Hyatt, San Diego. Wednesday-Friday. 27 hrs. \$250. Contact: Nomi Feldman, Box 705, La Jolla 92038. (714) 459-0511.

October 28-29—Management of Cancer. UCLA. Saturday-Sunday.

November 4—GI Oncology. Alta Bates Hospital, Berkeley. Saturday. 6 hrs. Contact: Claudia Read, Med. Ed., Alta Bates Hosp., 1 Colby Plaza, Berkeley 94705. (415) 845-7110, ext. 2055.

November 11—Cancer 1978. Palo Alto Med. Clinic. Saturday. Contact: William D. McKee, MD, Palo Alto Med. Clinic, 300 Homer Ave., Palo Alto 94301. (415) 321-4121.

EMERGENCY MEDICINE

September 6-8—Manipulative Skills in Emergency Medicine. UCSF at San Francisco General Hospital. Wednesday-Friday. 24 hrs.

September 10-15—Emergency Medical Care Symposium. UCD at Stanford Sierra Lodge, Fallen Leaf Lake. Sunday-Friday. 27-37 hrs. \$275.

September 11-15—Emergency Medicine—Symposium 2. USC. Monday-Friday.

September 11-15—Postgraduate Institute for Emergency Physicians, Symposium I. UCSD at Town and Country Hotel, San Diego. Monday-Friday. 40 hrs. \$350.

September 18-22—Physician Extenders Program. USC. Monday-Friday.

October 18-June 3—Emergency Medicine. USC. 16 Wednesdays.

October 23-27—Topics in Emergency Medicine. UCSF. Monday-Friday.

October 27-28—Orthopedics for the Emergency Physician. PMC. Friday-Saturday. 9 hrs. \$150.

October 30-November 3—Postgraduate Institute for Emergency Physicians, Symposium III. UCSD at Vacation Village, San Diego. Monday-Friday. 40 hrs. \$350.

December 4-8—Emergency Medicine—Symposium 3. USC. Monday-Friday.

December 4-8—Medical Management of EMS Systems. UCSD at Sheraton Harbor Hotel, San Diego. Monday-Friday. 35 hrs. \$100.

December 7-8—Advanced Emergency Medicine Course. UCSF. Thursday-Friday.

December 11-15—Postgraduate Institute for Emergency Physicians, Symposium II. UCSD. Monday-Friday. 40 hrs. \$350.

December 16—ENT for Emergency Physicians. Memorial Hospital Medical Center of Long Beach. Saturday. 7 hrs. Contact: Prog. Coordinator, Center for Health Education, 2801 Atlantic Ave., Long Beach 90801. (213) 595-3811.

MEDICINE

August 16-19—Medical Mycology-Dermatomycology—3rd Annual Postgraduate Course and Workshop. UCI and Memorial Hospital Medical Center, Long Beach. Wednesday-Saturday. 33 hrs. \$300. Contact: Exec. Sec., Center for Health Education, 2801 Atlantic Ave., Long Beach 90801. (213) 595-3811.

August 19-20—Symposium: Inflammatory Pulmonary Disease. Mad River Community Hosp., Humboldt State Univ., and Humboldt-Del Norte Med. Soc. at Humboldt State University, Arcata. Saturday-Sunday. 10 hrs. \$100. Contact: Jeff Minckler, MD, PhD, Course Dir., Mad River Community Hosp., Arcata 95521. (707) 822-3621.

KEY TO ABBREVIATIONS AND SYMBOLS

Medical Centers and CMA Contacts for Information

- CMA:** California Medical Association
Contact: Continuing Medical Education, California Medical Association, 731 Market Street, San Francisco 94103. (415) 777-2000.
- DREW:** Charles R. Drew Postgraduate Medical School
Contact: Duane Dillman, PhD, Director, Office of Continuing Education, Charles R. Drew Postgraduate Medical School, 1621 East 120th Street, Los Angeles 90059. (213) 603-3091.
- LLU:** Loma Linda University
Contact: Varner J. Johns, Jr., MD, Associate Dean for Continuing Medical Education, Loma Linda University School of Medicine, Loma Linda 92354. (714) 796-7311, Ext. 2400.
- PMC:** Pacific Medical Center
Contact: Martin Brotman, MD, Chairman, Education Committee, Pacific Medical Center, P.O. Box 7999, San Francisco 94120. (415) 563-4321, ext. 2761.
- STAN:** Stanford University
Contact: Edward Rubenstein, MD, Associate Dean for Postgraduate Education, Stanford University School of Medicine, 300 Pasteur Drive, Stanford 94305. (415) 497-5594.
- UCD:** University of California, Davis
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- UCI:** University of California, California College of Medicine, Irvine
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- UCLA:** University of California, Los Angeles
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- UCSD:** University of California, San Diego
Contact: David Allan, MD, Associate Dean for Continuing Medical Education, University of California, San Diego, School of Medicine (M-017), La Jolla 92093. (714) 452-3708.
- UCSF:** University of California, San Francisco
Contact: Malcolm S. M. Watts, MD, Associate Dean and Director, Extended Programs in Medical Education, School of Medicine, University of California, San Francisco 94143. (415) 666-4251.
- USC:** University of Southern California
Contact: Phil R. Manning, MD, Associate Dean, Postgraduate Division, University of Southern California School of Medicine, 2025 Zonal Avenue, Los Angeles 90033. (213) 226-2047.

EPITOMES—GENERAL SURGERY

oscopists who were interested in establishing the safety of the technique. Now that colonoscopy is being done by physicians and surgeons of varying interest, skill and experience, will the morbidity—and mortality—remain at acceptable levels?

These questions and many others must be answered before the proper place of this important advance is known. Colonoscopy is expensive,

and it carries definite risks. For the present is seems wise to limit use of the procedure to patients who have solid indications.

THEODORE R. SCHROCK, MD

REFERENCES

- Overholt BF: Colonoscopy—A review. *Gastroenterology* 68: 1308-1320, May 1975
Schmitt MG Jr, Wu WC, Geenen JE, et al: Diagnostic colonoscopy—An assessment of the clinical indications. *Gastroenterology* 69:765-769, Sep 1975
Silvis SE, Nebel O, Rogers G, et al: Endoscopic complications—Results of the 1974 American Society for Gastrointestinal Endoscopy Survey. *JAMA* 23:928-930, Mar 1, 1976

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